## Eversyctal PLAZA.

PUBLIC DISCLOSURE COMMISSION				THIS SPACE FOR OFFICE USE
711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2929	LOBBYIST	REGISTRATION	L1 (12/18)	DATE FILED PDC
1. Lobbyist Name			JUL 08 2019	
Dave T. Sumnet IV				
House: 428 not. Pleasant Rd.			Business Telephone Numbers	
, , , ,			Permanent (366) Sol-4858	
Kelso WA	98626			
City State Zip			Cell Phone ( ) or Pager	
Mailing: Po box 86 - Carrolls, WA 98609				
2. Temporary Thurston County address during legislative session			E-Mail Address	
			NoneCulterty	
Employer's name and address (person or group for which you lobby)			Employer's o purpose of or	ccupation, business or description of ganization
NO Employers - I'm Self-Employed.			A/A	
Name and address of person having custody of accounts, receipts, books or other documents which substantiate			Employer E-Mail Address	
lobbyist reports. (Person responsible for producing the lobbyist employer's annual L-3 report.)			Employer E-r	. •
MP			MA .	
What is your pay (compensation) for lobbying?	Description of employment (check one	Phone Numb or more boxes)		
\$O perO	Full time employee UN Paid   Sole duty is lobbying			
(hour, day, month, year) Other: Explain:	☐ Part time or temporary employee ☐ Lobbying is only a part			
	☐ Contractor, retainer or similar agreement of other duties ☐ Unsalaried officer or member of group			
6. Are you reimbursed for lobbying expenses? Explain which	Does employer pay any of your lobbying expenses directly?  If yes, explain which ones.			
Yes: \$ per Yes: I am reimbursed for expenses.	No.			
☐ No: I am not reimbursed for expenses.	770			
7. How long do you expect to lobby for this organization?  Permanent lobbyist   Only during legislative session   Other, Explain:				
8. Is your employer a business or trade association or organization which lobbies on behalf of its members or a representative entity which lobbies on behalf of businesses, groups, associations, or organizations? If "yes," attach a list showing the name and address of each member or funder who has paid fees, dues or other payments over \$1,450 during either of the past two years or is expected to pay over \$1,450 this year.				
□ No				
9. Does your employer have a connected, related or closely affiliated political action committee which will provide funds for you to make political contributions including purchase tickets to fund raising events? If so, list the name of that political action committee.				
□ No				
Li Yes. Name of the committee is:				
10. If lobbyist is a company, partnership or similar business entity which employs others to perform actual lobbying duties, list name of each person who will lobby. (See WAC 390-20-143 and 144 for instructions.)				
I have no current Employees.				
<ol> <li>Areas of interest. Lobbying is most frequent before legisl or state agencies concerned with following subjects:</li> </ol>	Remarks:			
CODE SUBJECT CODE 01 Agriculture 09	I want to be an officially  Registerel (st.) Lobbyist for Purposes			
02 Business and consumer affairs 10 0 Constitutions and elections 11 7	Registerel (St.) Lobbyist for Durange			
04 Education 12	1			
06 Environmental affairs - natural 14 2	0 = making Certain things better			
resources - parks 15 2 16 1 16 1 16 1 17 17 17 17 17 17 17 17 17 17 17 17 1	winds pelter			
insurance 17 08 Fiscal 18	by upholing the U.S.CONST,			
<b>CERTIFICATION</b> : I hereby certify that the above is a true statement.	EMPLOYER'S AUTHORIZATION: Confirming the employment authority to lobby described in this registration statement.			
12. LOBBYIST'S SIGNATURE	EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE DATE			
Davegumner IV 7	108/2019 ass	NA		·